

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #  
(Ethics Commission filers)

2 Total pages filed: 25

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR

MR

FIRST

Gary

MI

M

NICKNAME

LAST

Cutler

SUFFIX

### OFFICE USE ONLY

Date Received

RECEIVED

APR 30 2012

Date Hand Delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

1035 Ranchers Club Lane

Driftwood, TX 78619

☐ Change of Address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

( 512 )

858-7282

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR

MR

FIRST

Samuel

MI

R

NICKNAME

LAST

Sam

Paul

SUFFIX

7 CAMPAIGN  
TREASURER  
ADDRESS  
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;

CITY;

STATE;

ZIP CODE

310 Springwood Road

Dripping Springs, TX 78620

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

( 512 )

894-4552

9 REPORT TYPE

☐

January 15

☒

30th day before election

☐

Runoff

☐

15th day after campaign treasurer appointment (officeholder only)

☐

July 15

☐

8th day before election

☐

Exceeded \$500 limit

☐

Final report (Attach C/OH - FR)

10 PERIOD  
COVERED

Month

Day

Year

01 / 01 / 2012

THROUGH

Month

Day

Year

04 / 19 / 2012

11 ELECTION

ELECTION DATE

Month

Day

Year

05 / 29 / 2012

ELECTION TYPE

☒

Primary

☐

Runoff

☐

General

☐

Special

12 OFFICE

OFFICE HELD (if any)

Hays County Sheriff

13 OFFICE SOUGHT (if known)

Hays County Sheriff

14 NOTICE  
OF DIRECT  
CAMPAIGN  
EXPENDITURE  
BY OTHER  
INDIVIDUALS

\*\* Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. \*\*

Name

Address / PO Box; Apt. / Suite #; City; State; Zip Code

☐ additional pages

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

**15 C/OH NAME**  
Gary M. Cutler

**16 ACCOUNT #** (Ethics Commission filers)

**17 NOTICE  
FROM  
POLITICAL  
COMMITTEE(S)**

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

N/A

☐ additional pages

**COMMITTEE TYPE**

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

**18 CONTRIBUTION  
TOTALS**

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 12,670.00

**EXPENDITURE  
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 12,299.92

**CONTRIBUTION  
BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

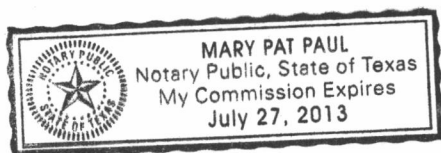
\$ 13,555.63

**OUTSTANDING  
LOAN TOTALS**

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0.00

**19 AFFIDAVIT**



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

*Gary Cutler*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said GARY CUTLER, this the 29<sup>th</sup> day of April, 20 12, to certify which, witness my hand and seal of office.

*Mary Pat Paul*  
Signature of officer administering oath

MARY PAT PAUL  
Printed name of officer administering oath

NOTARY  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A: 12

2 FILER NAME

Gary M. Cutler

3 ACCOUNT # (Ethics Commission filers)

4 Date

01/09/2012

5 Full name of contributor

☐ out-of-state PAC (ID#:

Jack E. & Anne M. Carson

7 Amount of  
contribution (\$)

8 In-kind contribution  
description (if applicable)

6 Contributor address; City; State; Zip Code

4815 FM 621

San Marcos, TX 78666-1612

200.00

9 Principal occupation \ Job title (See Instructions)

10 Employer (See Instructions)

Date

01/23/2012

Full name of contributor

☐ out-of-state PAC (ID#:

Connie Whisenant

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code

206 Gatlin Creek Road

Dripping Springs, TX 78666

100.00

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

02/03/2012

Full name of contributor

☐ out-of-state PAC (ID#:

Thomas M. Keel

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code

808 Brooks Hollow Rd.

Austin, TX 78734

100.00

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

02/03/2012

Full name of contributor

☐ out-of-state PAC (ID#:

Harvey Bell

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code

16401 Goldenwood Way

Austin, TX 78737

50.00

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

02/27/2012

Full name of contributor

☐ out-of-state PAC (ID#:

Fred A. & Jan H. Dorsey

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code

281 Skyline Ridge Lookout

Wimberley, TX 78678-6056

150.00

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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1 Total pages this Schedule A: 12

2 FILER NAME

Gary M. Cutler

3 ACCOUNT # (Ethics Commission filers)

4 Date

02/27/2012

5 Full name of contributor

☐ out-of-state PAC (ID#:

Ronald & Karen C. Gamble

7 Amount of  
contribution (\$)

8 In-kind contribution  
description (if applicable)

6 Contributor address; City; State; Zip Code

961 Montell Road

Wimberley, TX 78676-9705

100.00

9 Principal occupation \ Job title (See Instructions)

10 Employer (See Instructions)

Date

03/11/2012

Full name of contributor

☐ out-of-state PAC (ID#:

Steven Traeger

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code

102 Colleen Court

San Marcos, TX 78666

25.00

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

03/11/2012

Full name of contributor

☐ out-of-state PAC (ID#:

Constance Phillips

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code

41 Ridgewood Circle

Wimberley, TX 78676

15.00

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

03/18/2012

Full name of contributor

☐ out-of-state PAC (ID#:

Janet Ricks

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code

160 Bolton Drive

Austin, TX 78737

50.00

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date

03/18/2012

Full name of contributor

☐ out-of-state PAC (ID#:

Judith George

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code

2007 Hidden Hills Dr.

Dripping Springs, TX 78620

25.00

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A: 12	
2 FILER NAME <b>Gary M. Cutler</b>		3 ACCOUNT # (Ethics Commission filers)	
4 Date 03/19/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Randall K. Daugherty 6 Contributor address; City; State; Zip Code 6705 N. Lamar Blvd. Austin, TX 78752	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
9 Principal occupation \ Job title (See Instructions)		10 Employer (See Instructions)	
Date 03/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Lewis M. Smith Contributor address; City; State; Zip Code P.O. Box 2231 Wimberley, TX 78676	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 03/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Sandra A. McKenzie Contributor address; City; State; Zip Code 55 Woodcreek Drive Wimberley, TX 78676	Amount of contribution (\$) 40.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 03/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Royce W. Gunderiach Contributor address; City; State; Zip Code P.O. Box 898 Wimberley, TX 78676	Amount of contribution (\$) 10.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 03/19/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jill B. Wood Contributor address; City; State; Zip Code 500 Deer Lake Road Wimberley, TX 78676-5805	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
<b>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A: 12

2 FILER NAME

Gary M. Cutler

3 ACCOUNT # (Ethics Commission filers)

4 Date  
03/19/2012

5 Full name of contributor ☐ out-of-state PAC (ID#:  
Carol M. Bowman

7 Amount of  
contribution (\$)

8 In-kind contribution  
description (if applicable)

6 Contributor address; City; State; Zip Code  
279 Mountain Laurel Way  
Austin, TX 78737

15.00

9 Principal occupation \ Job title (See Instructions)

10 Employer (See Instructions)

Date  
03/19/2012

Full name of contributor ☐ out-of-state PAC (ID#:  
Ralph Daniel Davis

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code  
P.O. Box 1135  
Wimberley, TX 78676

25.00

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date  
03/19/2012

Full name of contributor ☐ out-of-state PAC (ID#:  
Jim W. McDonald

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code  
705 Saddleridge Dr.  
Wimberley, TX 78676

50.00

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date  
03/19/2012

Full name of contributor ☐ out-of-state PAC (ID#:  
Jana B. White

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code  
P.O. Box 606  
Wimberley, TX 78676

50.00

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date  
03/19/2012

Full name of contributor ☐ out-of-state PAC (ID#:  
Stephanie A. Brown

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

Contributor address; City; State; Zip Code  
14401 Red Oak Cove  
Austin, TX 78737

100.00

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A: 12	
2 FILER NAME Gary M. Cutler		3 ACCOUNT # (Ethics Commission filers)	
4 Date 03/20/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: James Michael Farr 6 Contributor address; City; State; Zip Code 1011 Westland Ridge Rd. Dripping Springs, TX 78620	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
9 Principal occupation \ Job title (See Instructions)		10 Employer (See Instructions)	
Date 03/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jackie Appelt Contributor address; City; State; Zip Code 9000 W. Fitzhugh Rd. Dripping Springs, TX 78720	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 03/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Nadine Hales Contributor address; City; State; Zip Code 1 Woodview Court Wimberley, TX	Amount of contribution (\$) 30.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 03/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Linda McAdoo Contributor address; City; State; Zip Code 140 Little Pool Rd. Buda, TX 78610	Amount of contribution (\$) 30.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 03/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Lawrence Bader Contributor address; City; State; Zip Code 447 Miss Donna Lane Dripping Springs, TX 78620	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A: 12	
2 FILER NAME Gary M. Cutler		3 ACCOUNT # (Ethics Commission filers)	
4 Date 03/20/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: John F. Washburn  6 Contributor address; City; State; Zip Code 310 Leisurewoods Dr. Buda, TX 78610-2418	7 Amount of contribution (\$) 50.00	8 In-kind contribution description (if applicable)
9 Principal occupation \ Job title (See Instructions)		10 Employer (See Instructions)	
Date 03/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Lee F. Taylor  Contributor address; City; State; Zip Code 310 Juniper Dr. Mountain City, Tx 78610-9283	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 02/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Pedro A. Champion  Contributor address; City; State; Zip Code 502 Quail Run San Marcos, TX 78666-9440	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 03/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jimmie Scott  Contributor address; City; State; Zip Code 2236 Garden CT San Marcos, TX 78666	Amount of contribution (\$) 15.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 03/21/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Mark S. Bennett  Contributor address; City; State; Zip Code 1305 Oak Meadow Dr. Dripping Springs, TX 78620	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1** Total pages this Schedule A: 12**2 FILER NAME**

Gary M. Cutler

**3** ACCOUNT # (Ethics Commission filers)**4** Date  
03/21/2012**5** Full name of contributor ☐ out-of-state PAC (ID#:  
Steve & Kay M. Carter**7** Amount of  
contribution (\$)**8** In-kind contribution  
description (if applicable)**6** Contributor address; City; State; Zip Code

P.O. Box 220

Dripping Springs, TX 78620

100.00

**9** Principal occupation \ Job title (See Instructions)**10** Employer (See Instructions)**Date**  
03/23/2012**Full name of contributor** ☐ out-of-state PAC (ID#:  
Robert & Rene M. Hensley**Amount of  
contribution (\$)****In-kind contribution  
description (if applicable)****Contributor address; City; State; Zip Code**

111 Indian Springs Trace

Dripping Springs, TX

25.00

**Principal occupation \ Job title (See Instructions)****Employer (See Instructions)****Date**  
03/23/2012**Full name of contributor** ☐ out-of-state PAC (ID#:  
Chris Bounds**Amount of  
contribution (\$)****In-kind contribution  
description (if applicable)****Contributor address; City; State; Zip Code**

14412 Friendswoods Ln.

Austin, TX 78737

25.00

**Principal occupation \ Job title (See Instructions)****Employer (See Instructions)****Date**  
03/23/2012**Full name of contributor** ☐ out-of-state PAC (ID#:  
Sarah K. Brandon**Amount of  
contribution (\$)****In-kind contribution  
description (if applicable)****Contributor address; City; State; Zip Code**

13062 HWY 290, Suite 206

Austin, TX 78737

150.00

**Principal occupation \ Job title (See Instructions)****Employer (See Instructions)****Date**  
03/23/2012**Full name of contributor** ☐ out-of-state PAC (ID#:  
Loren O. Wilber**Amount of  
contribution (\$)****In-kind contribution  
description (if applicable)****Contributor address; City; State; Zip Code**

301 Willet

Buda, TX 78610

20.00

**Principal occupation \ Job title (See Instructions)****Employer (See Instructions)****ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED****If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.**

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1** Total pages this Schedule A: 12**2 FILER NAME****Gary M. Cutler****3** ACCOUNT # (Ethics Commission filers)**4** Date  
03/23/2012**5** Full name of contributor ☐ out-of-state PAC (ID#:  
Vance Wright**7** Amount of  
contribution (\$)**8** In-kind contribution  
description (if applicable)**6** Contributor address; City; State; Zip Code  
P.O. Box 1508  
Wimberley, TX 78676

50.00

**9** Principal occupation \ Job title (See Instructions)**10** Employer (See Instructions)Date  
03/23/2012Full name of contributor ☐ out-of-state PAC (ID#:  
Barbara W. LaBordeAmount of  
contribution (\$)In-kind contribution  
description (if applicable)Contributor address; City; State; Zip Code  
4721 FM 150 West  
Kyle, TX 78640

50.00

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date  
03/23/2012Full name of contributor ☐ out-of-state PAC (ID#:  
Zachary Graham, Jr.Amount of  
contribution (\$)In-kind contribution  
description (if applicable)Contributor address; City; State; Zip Code  
4710 West US 290  
Dripping Springs, TX 78620-3454

25.00

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date  
03/23/2012Full name of contributor ☐ out-of-state PAC (ID#:  
Terry Keel CampaignAmount of  
contribution (\$)In-kind contribution  
description (if applicable)Contributor address; City; State; Zip Code  
1801 Lavaca St., STE 4G  
Austin, TX 78701

2,000.00

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

Date  
03/30/2012Full name of contributor ☐ out-of-state PAC (ID#:  
Michele T. BaumanAmount of  
contribution (\$)In-kind contribution  
description (if applicable)Contributor address; City; State; Zip Code  
401 Quail Run, Unit B  
San Marcos, TX 78666-9414

20.00

Principal occupation \ Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED****If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.**



**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A: 12	
2 FILER NAME <b>Gary M. Cutler</b>		3 ACCOUNT # (Ethics Commission filers)	
4 Date 03/30/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Clarence D Jamail 6 Contributor address; City; State; Zip Code 203 Live Oak Dr. Mountain City, TX 78610	7 Amount of contribution (\$) 25.00	8 In-kind contribution description (if applicable)
9 Principal occupation \ Job title (See Instructions)		10 Employer (See Instructions)	
Date 03/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: David Crowell Contributor address; City; State; Zip Code P.O. Box 455 Kyle, TX 78640	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 03/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Nancye Britner Contributor address; City; State; Zip Code 49 Woodcreek Dr. Wimberley, TX 78676	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 03/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Gina Fulkerson Contributor address; City; State; Zip Code 131 River Bend Rd. Wimberley, TX 78676	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 03/30/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Chad L. Swedberg Contributor address; City; State; Zip Code 12975 Trails End Austin, TX 78737-9503	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED****If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.**

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A: 12	
2 FILER NAME Gary M. Cutler		3 ACCOUNT # (Ethics Commission filers)	
4 Date 03/30/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Bruce Boardman  6 Contributor address; City; State; Zip Code 128 Hidden Canyon CV Driftwood, TX	7 Amount of contribution (\$)  600.00	8 In-kind contribution description (if applicable)
9 Principal occupation \ Job title (See Instructions)		10 Employer (See Instructions)	
Date 04/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Ken C. Nichlas  Contributor address; City; State; Zip Code 611 Roy Creek Trl Dripping Springs, TX 78620	Amount of contribution (\$)  100.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 04/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Col. C. E. Bonney, USA RET  Contributor address; City; State; Zip Code 700 Barton Creek Dr. Dripping Springs, TX 78620	Amount of contribution (\$)  100.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 04/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Russ Molenaar  Contributor address; City; State; Zip Code P. O. Box 852 Dripping Springs, TX 78620	Amount of contribution (\$)  200.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 04/04/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: J. Raymond Schiflett, 111  Contributor address; City; State; Zip Code 253 Covered Bridge Dr. Driftwood, TX 78619	Amount of contribution (\$)  50.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

**If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.**



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A: 12	
2 FILER NAME Gary M. Cutler		3 ACCOUNT # (Ethics Commission filers)	
4 Date 04/06/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: J. R. Page 6 Contributor address; City; State; Zip Code 14404 Sandy Side Drive Austin, TX 78728	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
9 Principal occupation \ Job title (See Instructions)		10 Employer (See Instructions)	
Date 04/06/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: W. Tim Bartlett Contributor address; City; State; Zip Code 3601 Woodcutters Way Austin, TX 78746-1574	Amount of contribution (\$) 1,000.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 04/06/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Della Brodrick Contributor address; City; State; Zip Code P.O. Box 831 Wimberley, TX 78676	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 04/13/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: James A or Deborah Sue Smith Contributor address; City; State; Zip Code P.O. Box 91954 Austin, TX 78709-1954	Amount of contribution (\$) 2,500.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 04/13/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Shelly Ann Sanford Contributor address; City; State; Zip Code 447 Carney Ranch Rd. Wimberley, TX 78676	Amount of contribution (\$) 1,000.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

**If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.**



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A: 12	
2 FILER NAME Gary M. Cutler		3 ACCOUNT # (Ethics Commission filers)	
4 Date 04/13/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Dawn D. Overstreet Schenk 6 Contributor address; City; State; Zip Code 1400 Wood Loop Driftwood, TX 78619-8057	7 Amount of contribution (\$) 50.00	8 In-kind contribution description (if applicable)
9 Principal occupation \ Job title (See Instructions)		10 Employer (See Instructions)	
Date 04/13/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: David M. Edwards Contributor address; City; State; Zip Code 4 Laurel Hill Dr. Austin, TX 78737	Amount of contribution (\$) 75.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 04/16/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: A&E Signs and Graphics Contributor address; City; State; Zip Code 100 Houston St., Suite C Buda, TX 78610	Amount of contribution (\$) 400.00	In-kind contribution description (if applicable) Campaign Sign Lettering for RE-Elect
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 04/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Elaine G. Leonard Contributor address; City; State; Zip Code 959 Ranchers Club Ln. Driftwood, TX 78619-4364	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	
Date 04/17/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: George Manassian Contributor address; City; State; Zip Code 12917 Withers Way Austin, TX 78727	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation \ Job title (See Instructions)		Employer (See Instructions)	

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 10
2 FILER NAME <b>Gary M. Cutler</b>		3 ACCOUNT # (Ethics Commission filers)
4 Date 01/09/2012	5 Payee name Hays County Republican Party ..... 6 Payee address; City; State; Zip Code P.O. Box 1655 San Marcos, TX 78667	7 Amount (\$)  380.00
8 Purpose of payment (See instructions regarding type of information required.) Contribution/Donation - Sponsor table Lincoln Reagan Dinner		9 .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
Date 01/13/2012	Payee name Dripping Springs Tiger Softball/DSHS Softball ..... Payee address; City; State; Zip Code 616 Meadow Oaks Dr. Dripping Springs, TX 78620	Amount (\$)  150.00
Purpose of payment (See instructions regarding type of information required.) Contribution/Donation - Hole sponsor Golf Tournament		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
Date 01/14/2012	Payee name WIX.com, Inc. ..... Payee address; City; State; Zip Code New York, NY	Amount (\$)  9.90
Purpose of payment (See instructions regarding type of information required.) Campaign Expense - Monthly WEB Site Fee		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
Date 01/23/2012	Payee name Dripping Springs Chamber of Commerce ..... Payee address; City; State; Zip Code P.O. Box 206 Dripping Springs, TX 78620	Amount (\$)  250.00
Purpose of payment (See instructions regarding type of information required.) Contribution/Donation - Gold level Sponsor at Awards Event		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</b>		

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> Total pages Schedule F: 10	
<b>2</b> FILER NAME <b>Gary M. Cutler</b>		<b>3</b> ACCOUNT # (Ethics Commission filers)	
<b>4</b> Date 01/24/2012	<b>5</b> Payee name Dripping Springs United Methodist Church <hr style="border-top: 1px dotted black;"/> <b>6</b> Payee address; City; State; Zip Code P.O. Box 99 Dripping Springs, TX 78620	<b>7</b> Amount (\$)  100.00	
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Contribution/Donation - DSUMC 2012 Wild Game Dinner Family Sponsor		<b>9</b> .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name      Office sought      Office held	
Date 02/08/2012	Payee name Quicksand at Woodcreek Golf Course <hr style="border-top: 1px dotted black;"/> Payee address; City; State; Zip Code #1 Pro Lane Wimberley, TX 78676	Amount (\$)  84.00	
Purpose of payment (See instructions regarding type of information required.) Contribution/Donation - Green & Cart Fees Licoln Reagan Dinner Auction Item		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name      Office sought      Office held	
Date 02/08/2012	Payee name Vista Print <hr style="border-top: 1px dotted black;"/> Payee address; City; State; Zip Code 95 Hayden Ave Lexington, MA 02421	Amount (\$)  18.31	
Purpose of payment (See instructions regarding type of information required.) Printing Expense - Return Address Mailing Labels		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name      Office sought      Office held	
Date 02/14/2012	Payee name WIX.com, Inc. <hr style="border-top: 1px dotted black;"/> Payee address; City; State; Zip Code New York, NY	Amount (\$)  9.90	
Purpose of payment (See instructions regarding type of information required.) Campaign Expense - Monthly WEB Site Fee		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name      Office sought      Office held	
<b>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</b>			



**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** Total pages Schedule F: 10**2 FILER NAME****Gary M. Cutler****3** ACCOUNT # (Ethics Commission filers)**4** Date

02/14/2012

**5** Payee name

Print Plus

**7**

Amount

(\$)

**6** Payee address; City; State; Zip Code

222 W. Highway 290

Dripping Springs, TX 78620

64.92

**8** Purpose of payment (See instructions regarding type of information required.)Campaign Expense - 3 Signature stamps  
for campaign mailout**9** .. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

02/20/2012

Payee name

Minuteman Press

Amount

(\$)

Payee address; City; State; Zip Code

1221 W. 6th St., Suite B

Austin, TX 78703

2,956.24

**8** Purpose of payment (See instructions regarding type of information required.)Printing Expense - Campaign mailout of  
letters, envelopes, remittance envelopes

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

02/26/2012

Payee name

Mary Pat Paul

Amount

(\$)

Payee address; City; State; Zip Code

310 Springcreek Road

Dripping Springs, TX 78620

53.91

**8** Purpose of payment (See instructions regarding type of information required.)Campaign Expense - Reimbursement for  
campaign supplies for mailout

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

02/26/2012

Payee name

LULAC

Amount

(\$)

Payee address; City; State; Zip Code

414 S. CM Allen

San Marcos, TX 78666

24.00

**8** Purpose of payment (See instructions regarding type of information required.)

Contribution/Donation - BBQ Chickens

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> Total pages Schedule F: 10
<b>2</b> FILER NAME <b>Gary M. Cutler</b>		<b>3</b> ACCOUNT # (Ethics Commission filers)
<b>4</b> Date 03/05/2012	<b>5</b> Payee name Minuteman Press  ..... <b>6</b> Payee address; City; State; Zip Code 1221 W. 6th St., Suite B Austin, TX 78703	<b>7</b> Amount (\$)         322.61
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Campaign Expense - Bumper Stickers		<b>9</b> .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
Date 03/11/2012	Payee name Pay Pal  ..... Payee address; City; State; Zip Code  San Jose, CA	Amount (\$)         1.77
Purpose of payment (See instructions regarding type of information required.) Campaign Expense - Processing Fee for WEB Site Donations		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
Date 03/14/2012	Payee name WIX.com, Inc.  ..... Payee address; City; State; Zip Code  New York, NY	Amount (\$)         9.90
Purpose of payment (See instructions regarding type of information required.) Campaign Expense - Monthly WEB Site Fee		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
Date 03/18/2012	Payee name Pay Pal  ..... Payee address; City; State; Zip Code  San Jose, CA	Amount (\$)         2.78
Purpose of payment (See instructions regarding type of information required.) Campaign Expense - Processing Fee for WEB Site Donations		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</b>		

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> Total pages Schedule F: 10	
<b>2</b> FILER NAME <b>Gary M. Cutler</b>		<b>3</b> ACCOUNT # (Ethics Commission filers)	
<b>4</b> Date 03/18/2012	<b>5</b> Payee name Mary Pat Paul ..... <b>6</b> Payee address; City; State; Zip Code 310 Springwood Road Dripping Springs, TX 78620	<b>7</b> Amount (\$)        2,700.00	
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Campaign Expense - Reimbursement for postage stamps for campaign mailout		<b>9</b> .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name      Office sought      Office held	
Date 03/19/2012	Payee name Vista Print ..... Payee address; City; State; Zip Code 95 Hayden Ave Lexington, MA 02421	Amount (\$)        54.67	
Purpose of payment (See instructions regarding type of information required.) Printing Expense - Thank You Cards		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name      Office sought      Office held	
Date 03/19/2012	Payee name Capital Area Council ..... Payee address; City; State; Zip Code 12500 North IH 35 Austin, TX 78753-1312	Amount (\$)        50.00	
Purpose of payment (See instructions regarding type of information required.) Contribution/Donation - Boy Scouts of America Donation		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name      Office sought      Office held	
Date 03/19/2012	Payee name Jackson Chapel ..... Payee address; City; State; Zip Code 524 Center St. San Marcos, TX 78666	Amount (\$)        30.00	
Purpose of payment (See instructions regarding type of information required.) Contribution/Donation - Tickets for fund raiser banquet		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name      Office sought      Office held	
<b>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</b>			

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> Total pages Schedule F: 10	
<b>2</b> FILER NAME <b>Gary M. Cutler</b>		<b>3</b> ACCOUNT # (Ethics Commission filers)	
<b>4</b> Date 03/20/2012	<b>5</b> Payee name Vista Print ..... <b>6</b> Payee address; City; State; Zip Code 95 Hayden Ave. Lexington, MA 02421	<b>7</b> Amount (\$)  194.49	
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Printing Expense - Re-Elect Push Cards		<b>9</b> .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held	
Date 04/05/2012	Payee name Minuteman Press ..... Payee address; City; State; Zip Code 1221 W. 6th St., Suite B Austin, TX 78703	Amount (\$)  310.66	
Purpose of payment (See instructions regarding type of information required.) Printing Expense - Bumper Stickers		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held	
Date 04/06/2012	Payee name Vista Print ..... Payee address; City; State; Zip Code 95 Hayden Ave Lexington, MA 02421	Amount (\$)  142.59	
Purpose of payment (See instructions regarding type of information required.) Printing Expense - Re-Elect Stickers and Re-Elect Banner		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held	
Date 04/10/2012	Payee name Dripping Springs Lions Club ..... Payee address; City; State; Zip Code P.O. Box 53 Dripping Springs, TX 78620	Amount (\$)  150.00	
Purpose of payment (See instructions regarding type of information required.) Contribution/Donation - Hole Sponsor DS Lions Club Golf Tournament		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held	

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> Total pages Schedule F: 10	
<b>2</b> FILER NAME <b>Gary M. Cutler</b>		<b>3</b> ACCOUNT # (Ethics Commission filers)	
<b>4</b> Date 04/10/2012	<b>5</b> Payee name VFW Post #6441  <b>6</b> Payee address; City; State; Zip Code P.O. Box 535 Wimberley, TX 78676	<b>7</b> Amount (\$)        650.00	
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Contribution/Donation - Wimberley VFW Rodeo Sponsor & Box Seats		<b>9</b> .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name      Office sought      Office held	
Date 04/10/2012	Payee name San Marcos A.G.I.F. Women's Chapter  Payee address; City; State; Zip Code 1406 Delmar St. San Marcos, TX 78666	Amount (\$)        100.00	
Purpose of payment (See instructions regarding type of information required.) Contribution/Donation - American GI Forum		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name      Office sought      Office held	
Date 04/12/2012	Payee name The Home Depot #8995  Payee address; City; State; Zip Code 260 East Highway 290 Dripping Springs, TX 78620	Amount (\$)        183.59	
Purpose of payment (See instructions regarding type of information required.) Campaign Expense - T-Posts for erecting campaign signs		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name      Office sought      Office held	
Date 04/14/2012	Payee name WIX.com, Inc.  Payee address; City; State; Zip Code  New York, NY	Amount (\$)        9.90	
Purpose of payment (See instructions regarding type of information required.) Campaign Expense - Monthly WEB Site Fee		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name      Office sought      Office held	
<b>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</b>			

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** Total pages Schedule F: 10**2** FILER NAME**Gary M. Cutler****3** ACCOUNT # (Ethics Commission filers)**4** Date

04/16/2012

**5** Payee name

A&amp;E Signs and Graphics

**7**

Amount

(\$)

**6** Payee address; City; State; Zip Code

100 Houston Street, Suite C

Buda, TX 78610

1,431.61

**8** Purpose of payment (See instructions regarding type of information required.)

Printing Expense - Campaign Signs and yard signs

**9** \*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name

Office sought

Office held

Date

04/16/2012

Payee name

Postmaster

Amount

(\$)

Payee address; City; State; Zip Code

P.O. Box 9998

Driftwood TX 78619-9998

44.00

**8** Purpose of payment (See instructions regarding type of information required.)

Campaign Expense - Post Office Box Annual Rental Fee

**9** \*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name

Office sought

Office held

Date

04/16/2012

Payee name

Mary Pat Paul

Amount

(\$)

Payee address; City; State; Zip Code

310 Springwood Road

Dripping Springs, TX 78620

560.17

**8** Purpose of payment (See instructions regarding type of information required.)

Event Expense - Reimbursement for Parade T-Shirts and supplies

**9** \*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name

Office sought

Office held

Date

04/16/2012

Payee name

DSHS Project Graduation 2012 c/o Karen Rapp

Amount

(\$)

Payee address; City; State; Zip Code

14021 Nutty Brown Rd.

Austin, TX 78737

200.00

**8** Purpose of payment (See instructions regarding type of information required.)

Contribution/Donation - Campaign Contribution Project Graduation

**9** \*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name

Office sought

Office held

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**



**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> Total pages Schedule F: 10	
<b>2</b> FILER NAME <b>Gary M. Cutler</b>		<b>3</b> ACCOUNT # (Ethics Commission filers)	
<b>4</b> Date 04/16/2012	<b>5</b> Payee name Hays HS Project Graduation 2012 c/o Karen Sandler ..... <b>6</b> Payee address; City; State; Zip Code P.O. Box 634 Buda, TX 78610	<b>7</b> Amount (\$)          200.00	
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Contribution/Donation - Campaign Contribution Project Graduation		<b>9</b> .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held	
Date 04/16/2012	Payee name Lehman High School Project Graduation ..... Payee address; City; State; Zip Code P.O. Box 2742 Kyle, TX 78640	Amount (\$)          200.00	
Purpose of payment (See instructions regarding type of information required.) Contribution/Donation - Campaign Contribution Project Graduation		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held	
Date 04/16/2012	Payee name Wimberley High School Project Graduation ..... Payee address; City; State; Zip Code P.O. Box 324 Wimberley, TX 78676-0324	Amount (\$)          200.00	
Purpose of payment (See instructions regarding type of information required.) Contribution/Donation - Campaign Contribution Project Graduation		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held	
Date 04/16/2012	Payee name San Marcos HS Project Graduation 2011-2012 ..... Payee address; City; State; Zip Code 2549 Deer Stand Loop San Marcos, TX 78666	Amount (\$)          200.00	
Purpose of payment (See instructions regarding type of information required.) Contribution/Donation - Campaign Contribution Project Graduation		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held	

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** Total pages Schedule F: 10**2** FILER NAME**Gary M. Cutler****3** ACCOUNT # (Ethics Commission filers)**4** Date

04/16/2012

**5** Payee name

City of Dripping Springs Founders Day

**7**Amount  
(\$)**6** Payee address; City; State; Zip Code

P.O. Box 384

Dripping Springs, TX 78620

100.00

**8** Purpose of payment (See instructions regarding type of information required.)Contribution/Donation - Donation to  
participate in Founders Day Parade**9** .. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

04/17/2012

Payee name

Wimberley FFA Alumni Booster Club

Amount  
(\$)

Payee address; City; State; Zip Code

P.O. Box 2166

Wimberley, TX 78676

150.00

Purpose of payment (See instructions regarding type of information required.)

Contribution/Donation - Hole Sponsor  
Wimberley FFA Booster Club Golf Tournament

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount  
(\$)

Payee address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount  
(\$)

Payee address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

# IN-KIND CONTRIBUTION OR POLITICAL EXPENDITURE FOR TRAVEL OUTSIDE OF TEXAS

## SCHEDULE T

The Instruction Guide explains how to complete this form.

1 Total pages Schedule T: 01

2 FILER NAME

Gary M. Cutler

3 ACCOUNT # (Ethics Commission filers)

4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

A&E Signs and Graphics

5 Contribution / Expenditure reported on:

- ☒ Schedule A ☐ Schedule B ☐ Schedule C ☐ Schedule D ☐ Schedule F ☐ Schedule G  
☐ Schedule H ☐ Schedule N ☐ COH-UC ☐ COH-T ☐ PAC-C ☐ PAC-E

6 Dates of travel

7 Name of person(s) traveling

8 Departure city or name of departure location

9 Destination city or name of destination location

10 Means of transportation

11 Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

- ☒ Schedule A ☐ Schedule B ☐ Schedule C ☐ Schedule D ☐ Schedule F ☐ Schedule G  
☐ Schedule H ☐ Schedule N ☐ COH-UC ☐ COH-T ☐ PAC-C ☐ PAC-E

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

- ☒ Schedule A ☐ Schedule B ☐ Schedule C ☐ Schedule D ☐ Schedule F ☐ Schedule G  
☐ Schedule H ☐ Schedule N ☐ COH-UC ☐ COH-T ☐ PAC-C ☐ PAC-E

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

Purpose of travel (including name of conference, seminar, or other event)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED